

S E C R E T

ATTACHMENT C

Approved For Release 2003/03/04 : CIA-RDP78-04914A000200140051-5

**TIME AND ATTENDANCE REPORT FOR
FIELD CONTRACT EMPLOYEES**

PAY PERIOD _____ 195_ to _____ 195_ STATION _____

NAME _____ EMPLOYEE NUMBER _____

	D A Y	HOURS WORKED						D A Y	HOURS WORKED				
		A. M.		P. M.		Total			A. M.		P. M.		Total
		From	To	From	To				From	To	From	To	
First Week	S						Second Week	S					
	M							M					
	T							T					
	W							W					
	T							T					
	F							F					
	S							S					
		Total Hours Worked							Total Hours Worked				
Third Week	S						Fourth Week	S					
	M							M					
	T							T					
	W							W					
	T							T					
	F							F					
	S							S					
		Total Hours Worked							Total Hours Worked				

Employee's Signature

I certify that the above named contract employee worked a total of _____ hours during
pay period indicated above.

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Administrative Officer

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Supervisor